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Date: SEPTEMBER 13, 2004

To: EXAMINER DINH
U.S. PATENT AND TRADEMARK OFFICE
Fax #: (703) 872-9318

From: FRANK C. NICHOLAS
Phone #: (847) 424-2521

Client/Matter No.: US010726 (7790/69)

of Pages: 17
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TRANSMITTAL FORM

(TO BE USED FOR ALL CORRESPONDENCE AFTER MARCH 2000)

Attorney Docket No.	US010726 (7790/69)
Application Number	10/037,490
Filing Date	DECEMBER 28, 2001
First Named Inventor	BERND CLAUBERG
Group Art Unit	2821
Examiner	DINH, TRINH VO

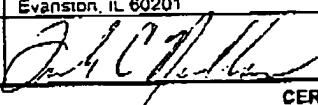
ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Supplemental Response to a Non Final Office Action Dated April 26, 2004	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Alter Final	<input type="checkbox"/> Drawings.	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> After Allowance Communication to Group	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Post Card Receipt
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<input type="checkbox"/> Information Disclosure Statement, PTO-1449, ari	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/>
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/>
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Request of Refund	<input type="checkbox"/>
	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No 50-1713. A duplicate copy of this sheet is enclosed.	<input type="checkbox"/>
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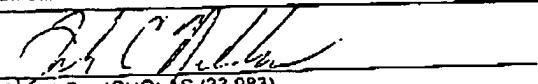
CALCULATION OF FEE

	Claims After Amendment		Highest No Previously Paid For	Present Extra	Small Entity		Large Entity	
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Indep		Minus			x \$43	0	4x \$88	\$0
First Presentation of Multiple Dep. Claim					-\$145	—	-\$290	—
					total add'l fee	\$ 0	total add'l fee	\$0

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	FRANK C. NICHOLAS Registration No 33,983 CARDINAL LAW GROUP 1603 Orrington Avenue, Suite 2000 Evanston, IL 60201
Signature	
	Date: September 13, 2004

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TRANSMITTAL FORM		Attorney Docket No	US010726 (7790/69)
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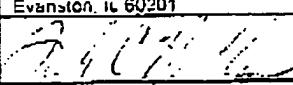
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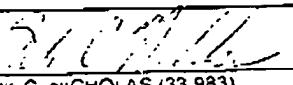
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Indep.		Minus			x \$43	0	4x \$86	\$0
First Presentation of Multiple Dep. Claim					+\$145	—	+\$290=	
					total add'l fee	5 0	total add'l fee	\$0

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Firm or Individual name	FRANK C. NICHOLAS Registration No. 33,983 CARDINAL LAW GROUP 1603 Orrington Avenue, Suite 2000 Evanston, IL 60201		
Signature			Date <u>September 13, 2004</u>

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